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A POLEMIC

An Editor of this JOURNAL whose writings were as much distinguished by their intellectual polish as by disarming detachment, admitted in the thick of a violent campaign against the medievalists which he was waging on behalf of rational positivism, that he had always by him a Latin dictionary. The present occupier of this chair, groaning under the burden of tradition so much mightier than the poor flesh, has frequent recourse to the works of an Englishman, whose literary achievement, certainly not mean, has been partially eclipsed by a penumbra of myth and lore. In the present intransigency, when the significance of these leading articles has been diversely and perversely misinterpreted, and there is no intention here of recanting an iota; when, moreover, a vigorous and determined assault has been made on the bastions of that asylum of fatuosity, the Institution of Propaganda, and it has been decried as the pusillanimous whimperings of a Little Englander and Disciple of Appeasement; all this " in the presence of a recession of our hopes and prospects unequalled since the fall of France "; now have our numb fingers ensanguined in the black blood of polemical butchery let slip the dripping pen, and fumbled franctically at the book of editorial life:

> Madam, have comfort: all of us have cause
> To wail the dimming of our shining star;
> But none can cure their harms by wailing them.

Chewing on this, we wheel back into battle. Of late weeks the world has beheld the spectacle of the Mother of Democracy as she sits in the antiquated fashion of the Victorians, straight-backed, full-bosomed, and very stolid before a crèche of puling politicians. We are adjured by our own maestro of historical persiflage to a return to rationalism. Have we yet had it? It is impossible to discern among the poodle-fakers of Westminster. Doctor Bourne, however, suggests that politicians should graduate from a university of political science and at least begin their nefarious career among the ratlines of the ship of state, with some understanding of its timbers and chart-house. But, to-day, their squeaky voices weary our unwilling ears, and their Fleet Street servitors unsavour what little is tasty for luncheon. While Winston Churchill is Prime Minister, there is guaranteed to " that calm courage in the midst of tumult, that serenity of soul in danger, which is the greatest gift of nature for command," the powerful wisdom of scholarship in the direction of Imperial affairs. *Mais après nous, la déluge.*

When the English were derided as a nation of shopkeepers, a mordant wit was cutting at the heart of enterprise. The village sweet-shop is more likely the home of our freedom than the imposing edifice down the road. So long as we can live our life as we choose, the worst shackles are laughed at. The solemn cynicism of the Sunday parade is as much an act of deference to the impositions of living as the carrying of an umbrella to the inclemencies of June; nothing stops wet feet of clay from growing heavy, whereas judicious compromise shelters the heart. Although the foundations of modern English liberty sprang up in the first age of commercial expansion, the Tudor, they support to-day many strange and unimagined buildings. One of these is the House of Science.

On a former occasion, we have had cause to point out the dangerous restrictions which Soviet science has imposed upon the investigation of plague and tularæmia epidemiology. There has been, in the past, more than a hint of the same danger to government-financed research in this country. The question arises whether such danger is inherent in all research under the government ægis.

The essential quality of research is disinterestedness. But it is open to debate whether a community abiding by the laws of self-government can act in the same disinterested way as can the individual. There is no simple transference of the rules of personal conduct to the behaviour of the state. Whereas a man may disregard his interests in carrying out an action, such as jumping into a river to save another's life, an elected government

cannot properly act in this way because it has been elected to maintain the interests of those whom it represents. A government, therefore, is justified in expending public money on research only if that work will benefit the electorate. Although most knowledge is thought to advance the common weal, many years may have to pass before its affects are felt; and under those conditions, no government, scenting the winds of a coming election, is likely to finance such experiments. These are the criteria of government research.

The disinterestedness of science approaches to the unwritten laws of world morality. While nations journey out to Armageddon, the spirit of science speaks to them in the common language of man. Before this the rationalised nationalism of Vansittart sinks into nothingness. The disciples of the evolutionary theory of politics are challenged; they maintain that the aggregation of men into families, families into clans, and clans into tribes and nations are beats in the rhythm of development which rises to the mighty concord of all peoples. But they forget that the tempo is one of increasing selfishness. Of all institutions man is the most selfless; he alone can act alone. The progress of science is not written, as the evolutionists would have us believe, in the multiple small acts of every day, but in the consummate act of human endeavour,, in the lives of Aristotle, Harvey, Pasteur. Whenever and wherever there is substituted for this an organised and formal advance, the sparkle of victory is snuffed out, and the momentum of an ersatz inspiration is spent in the waterless desert. This is the lesson of science as of war—for war is in the last analysis the primitive expression of that urge to win the world which finds its sublimation in the work of the scientist. A soldier summed up the situation shortly before the present war began:

> The British have been a free people and are still a comparatively free people; and though we are not, thank Heaven, a military nation, this tradition of freedom gives to our junior leaders in war a priceless gift of initiative. So long as this initiative is not cramped by too many regulations, by too much formalism, we shall, I trust, continue to win our battles—sometimes in spite of our higher commanders.

SOMEWHERE IN ENGLAND

They have said that wherever you go there are always a lot of Bart.'s men. Well, it so happened that at a certain training depôt of the R.A.M.C. in the South of England, there were gathered together a number of Bart.'s men sufficient to put a cricket team into the field, and still have two or three reserves. A challenge, therefore, was issued to the Sergeants' Mess, and accepted. Unfortunately, the captain of this Bart.'s side presented a somewhat exaggerated picture of his men's abilities to the captain of the Sergeants' team, who, consequently, put into the field eleven men who could play cricket, some of whom, including a recent Surrey County player, were definitely good.

Starting in the evening, after the day's work was over, it was agreed to play an hour and-a-quarter each way, the Sergeants batting first. Regrettably we had no young fast bowlers to make the most of the matting wicket, but Basil Cooper and Alan Hunt both performed with great credit; the former, with the assistance of "Peter" Wheeler, who made two brilliant catches, taking three wickets. Jimmy Millar, George Ellis, and A. D. Everett bowled, as expected, erratically and without much success, so that the Sergeants amassed the fine total of 137 for six wickets in an hour and-a-quarter. I feel that the less said about our batting the better. Hunt and Wheeler looked as though they might score some runs, but few came. One or two others shaped as though they had played cricket before, the rest supplied the comic relief; whenever "Pat" Spence missed the ball, about fifteen times in sixteen balls, the cry went up: "Oh, well left, sir!" However, by dint of keeping his feet resolutely still and stopping the only straight ball, he alone remained undefeated at the end, which came in an hour for 49 runs. Individual scores must remain a secret. The team was:—

Captains J. E. Miller, I. N. Fulton, Lieutenants A. H. Hunt, F. E. Wheeler, A. B. Cooper, A. D. Everett, G. H. Ellis, J. V. Gordon, J. D. Cronin, A. W. Spence, C. J. Longland. Scorer: R. B. Morton (St. Thomas's); Umpire: J. W. Piper (Guy's).

HOW IT USED TO BE

After waiting some time for the War Office to make up their minds whether I was too old or not, I was told to report for medical examination. This took place at D——, 170 miles away and a day's journey by train each way and stay the night, although there was a perfectly good Medical Board within fifteen miles.

An elderly colonel looked at me and said: "All right?" I said: "Yes." That was all, so I went home again and ordered my uniform.

I joined a large R.A.M.C. Mess at W——, adjoining a well-known military hospital. Many and various M.O.s were there. On being accepted we all got a long list of necessaries ordering us to purchase certain articles, such as a sword, field-glasses, revolver, compass, waterbottle, spurs, etc. Those who had had previous military experience laughed and got none of these things, but a few innocents got the lot: one small middle-aged M.O. arrived from S—— in the Midlands fully equipped—sword, Sam Browne, waterbottle, field-glasses, revolver, haversack, spurs all there, but unfortunately his leather gaiters were on the wrong legs and his long swan-necked spurs upside down. However, he soon got wise to things.

After some time at the hospital and just as I was settling down to the work and beginning to do some surgery, I was ordered off to the Eastern Mediterranean. There was much secrecy about my ship, etc., but at L—— everyone knew all about the ship's name, day of sailing, etc., anyway she was so big that she towered above the houses. She certainly was a magnificent ship: embarking was like entering a magnificent hotel, it took one a long time to find one's way about, there were so many decks.

I found I was posted as M.O. in charge of troops, about 5,000 men and 500 officers, but got no instructions till after we sailed early in the morning. Then I was handed papers telling me to go ashore and collect medical comforts, but as by that time we were about 500 miles on our voyage that was napoo. I was also told I had six M.O.s under me, but no one knew who or where they were; however, I collected them gradually and we got down to work. We were told to inoculate T.A.B., vaccinate, and give inoculation for cholera to the troops: this was a big undertaking with five days to do, but we did about 3,000 in all. It was a very pleasant trip as it turned out, the food was excellent and the company also. We eventually reached our destination and then we M.O.s waited about: some of us got to Egypt and went to a dirty,dusty camp with no work to do. Our P.M.O. was a short-tempered old gentleman, who evidently had no use for "Temporary Officers." We were a motley crowd, about twelve or fifteen of us, including a surgical specialist and physicians of high and low degree; there we were, idle. We asked for work and our P.M.O. said: "If you want work, you shall have it. Two hours drill every day." We fell in in a kind of sand-pit, strewn with bits of paper, old tins, etc., under a sergeant-major. He was very decent and evidently did not like the job. We nearly broke his heart: none of us wanted to drill, so we made it our business to go wrong whenever it was possible. The S.M. threw his hand in after apologising to us. Then a fiery adjutant R.A.M.C. took us on with no better success. However, a personal appeal to the General in Command, whom one of us knew, broke up the party and I think the P.M.O. got a wigging.

I then went to an island where there were many hospitals. We voyaged there in an old tramp steamer, the skipper said he could not zigzag as if he did we would never arrive, so we toddled along at about six knots. We had 6,000 chickens on board in crates, which made the ship somewhat like a farmyard. Every morning one was wakened by the crowing of cocks, or hens announcing that they had laid eggs; we fed well on chicken, much to the disgust of the Arabs who looked after them. There was hardly any deck space, so we could not get much exercise; we played "Shove Ha'penny" on the Captain's board; I managed to win all the coppers—about 8s. worth. I was no player, but the others were worse; then the Captain challenged me and easily got the lot. The ship reeked of palm oil and food tasted of it; she was an old West-Coaster.

On arrival at our destination we were met on landing by the Governor and his staff, but it was not to do us honour that he came. When he saw our little party landing, he came and asked who we were and how we had come. We said: "By s.s. 'Bornu'." He said: "Oh, good old 'Bornu'! I never thought she would get here." He was pleased because

the chickens had come!

My next job was M.O. Sanitary. I looked after the sanitation of two camp hospitals. My predecessor handed over his job and gave me a hint how to deal with inspecting Colonels. No. 1, a retired I.M.S., was terribly keen on flies and mosquitoes, so it was necessary always to have a nicely-oiled pool of water for him and sticky papers in the kitchen, with other fly-traps. No. 2 was great on incinerators, so he had to be taken to see ours, then to the mess for a glass of sherry and all was well.

From there, after a few months, I was back in England and had many and varied jobs; the odd thing about it all was the way one got shifted about for no apparent reason—just as one was getting down to one's job, one had to pack up and "proceed forthwith" for another destination. No one "went" anywhere, one always "proceeded." And after many weary hours by train one arrived, and, on reporting, no one knew anything about one nor seemed to care much either.

At one station I had the experience of doing a tracheotomy with a pocket-knife; I had only just arrived at the place when an urgent message came to go to the canteen—there I found an elderly storekeeper almost asphyxiated. There was nothing for it but to open his trachea: the only instrument was a borrowed pocket-knife. This was sharpened a little on a stone—I made an opening and he immediately improved. The next thing was how to keep the wound open while taking him to hospital. There were no tracheotomy tubes available. The only thing to do was keep the larger and blunter blade in the wound cross-wise to the incision. I sat in a taxi with my arm round him and held the knife in position—we had to drive about three miles. Every now and then the blade slipped out and had to be re-inserted. On arrival at the hospital, an old acquaintance of mine from Bart.'s came down the steps and said: "What the devil brings you here!" I explained the situation and the patient was taken in and a tube inserted. Apparently he had some kind of growth in his throat, part of which got detached and blocked the entrance of the trachea; at least that is what I heard afterwards. He did well and lived for six months.

After this episode I soon went to France—but that is another story.

E. F. N. C.

THE VICARAGE

I hungered and I thirsted,
I battled, sought and worsted
My patient's diagnosis,
In M.O.P.s, in M.O.P.s.
I wrote at fearful length,
About his waning strength;
Likewise took a gloomy view—
One pint please, a half won't do.

Before the unenlightened
Little, lone and frightened,
They bid me read my lines, please,
In M.O.P.s, in M.O.P.s.
Then thank the Lord that's that,
And once again I sat,
Defeated through and through—
One pint, please, a half won't do.

Now then, this I have to say
To those who ought to know it—
The Vicarage was shut that day.

FRIERN.

THE HISTORIAN OF FULWOOD PLACE

THE VITAMINS

Vitamin "A"
Keeps the rickets away
And succours the meagre and nervy;
"B's" what you lack
If the stomach is slack,
And "C" is the foe of the scurvy.
So when a man dines
Let him murmur these lines,
Or sure he will live to deplore it—
Just ask yourself, "What disease have I got,
And which is the Vitamin for it?"

A doctor with a microscope
Was mixing mutton-fat and soap
When what was his surprise to see
A thing invisible to me
(And I am quite prepared to bet
That no one else has seen it yet).
It showed upon its gentle face
Affection for the Human Race,
And it is very rare to find
An organism of this kind;
So, with a microscopic grin,
He christened it a Vitamin.

There are three Vitamins, not four,
I have no doubt there will be more,
But for the present you and me
Must do the best we can with three,
And Nelson, Raleigh, Drake, St. Paul
Did fairly well with none at all.
These simple people never knew
The secrets shared by me and you;
No chemical analysis
Of this and that, and that and this,
Their hearty dinners did condemn—
They gobbled what was given them;
But this affects a man's inside,
And all these foolish fellows died.

But you and I, of sterner schools,
Must eat by Scientific rules.
You may remember, as a kid,
A fuss about a Prote-id,
And at (I think) a later stage
The Calories became the rage;
The Carbohydrates now and then
Have exercised the learned men,
And whether people took enough
Albuminous and starchy stuff;
For nothing, we may well conclude,
Is quite so dangerous as food—
In fact, before the doctors call
It's safest not to eat at aíl.

It is my purpose here to state
That all these views are out of date,
And even surgeons now admit
The little Vitamin is "IT."
So do not plunge a hasty fork
Into the pickles or the pork,
But telephone to Harley Street
"Is this a vital thing to eat?"
Before you order what you want—
Tripe, caviare, or crême de menthe—
Before you seize and swallow whole
Some luscious bird or fancy sole,
Send for the manager and hiss,
"Is there a Vitamin in this?"

There are no Vitamins in lard,
From bacon they are wholly barred;
In potted meat they are not seen,
Nor olive-oil nor margarine,
In vain your families you cram
With coffee, cocoa, sugar, jam.
I very much regret to add
That tapioca's just as bad.
Nor do I know how we contrive
For years and years to keep alive
When most of what we eat and drink
Would be much better down the sink.

"A"

But courage! In cod-liver oil
The healthy little creatures toil;
And any backward child of mine
Who showed a softness of the spine
Should frequently be fed on that,
With good hard roes and bits of fat,
Fresh butter, cheese and yolk of egg
Will fortify the infant leg,
For here again are found, they say,
Those Vitamins we christen "A";
In cabbage, too, and other greens,
And lettuces (but not in beans).

"B"

But better still for you and me,
Who are not children now, is "B";
His duty, which he does not shirk,
Is just to make the stomach work.
If my supply of "B" is small
My liver does not act at all
And things go on in my inside
Which never can be justified.

Those old philosophers and Saints
Who had mysterious complaints,
And perished on some lonely mount
In ways for which we can't account—
The explanation's clear to me,
They did not get enough of "B."

Well, "B" occurs in nuts and peas,
In lentils, beans, and things like these,
In wholemeal rye and wholemeal wheat
And bread which is not fit to eat,
In roes of fish and some dried fruits
And milk and yeast and uncooked roots;
And death, as far as I can see,
May be preferred to eating "B."

"C"

But "C" is quite another thing,
Of "C" with frank delight I sing;
For "C's" the pretty Vitamin
Who makes and mends that schoolgirl skin,
And stops it coming out in lots
Of horrid, horrid little spots.
"C" is the very best excuse
For drinking pints of Orange Juice;
For "C's" sweet sake, fine ladies feed
Upon the radish and the swede.
Tomatoes, salads, lemons, milk,
Keep noble skins as smooth as silk;
The prettiest girl I ever saw
Ate cauliflower and rhubarb raw.
But best of all about him is
That "C" abounds in strawberries.

"D"

The doctors, I am glad to see,
Admit that there are none in tea;
They worship, as I said before,
Three only, but I know one more.
For I have found a Vitamin
In Brandy, Burgundy and Gin;
And I salute with three times three
The little chap I know as "D."

Vitamin "A"
Keeps the rickets away
And succours the meagre and nervy;
"B's" what you lack
If the tummy is slack,
And "C" is the foe of the scurvy;
And so when you dines
Remember these lines,
And if you'll be guided by me, Sir,
It don't matter what
Disease you have got,
Just order a bottle of "D," Sir.

G. LINDSAY JOHNSON.

THE OSTEOPATHIC LESION

By C. M. Cook.

The word lesion is well known in medical parlance, but it is used by the Doctor of Osteopathy to signify a particular type of abnormality. Lesions may be present in any tissue, but in this paper the spinal lesion only, some of its causes and some of its effects both local and remote, and treatment of its effects, will be considered.

An osteopathic lesion is not only a structural change, but such a change as influences function detrimentally not only of the lesioned joint, but also of the organs innervated through that segment. The causes of lesions fall under two general divisions, first: violence; second: failure to react to environment. In the first division all the lesions are primary in character, *i.e.*, the violence immediately changes the relations of structure, and this change becomes an obstruction to vital activity of the body fluids. If the lesion is not corrected by the recuperative power of the body itself or by outside efforts, the change in position is very likely to become complicated by a change in the character of the involved tissues.

The second division of lesions is a large one. These lesions develop as an evidence of the failure of the organism to become perfectly adapted to its food, clothing, labour or general environment. They are, therefore, secondary in character and must be recognised as objective symptoms of one functional derangement, while at the same time they operate primarily to cause functional derangement elsewhere. Thus they may be removed by manipulation and cease to act as an active cause of functional change, but they will return again so long as environmental forces are overwhelming.

The first division, or primary lesion, may result from sudden violence or from a force comparatively weak, but long continued. In other words, a lesion may be developed immediately under great force, or slowly as the result of great fatigue. An example of a lesion developing under fatigue is noted in the faulty positions assumed by the body following prolonged effort, or in performing certain tasks.

The second division, or secondary lesion, may result from failure to react properly to changes of temperature. The temperature of the surroundings may be the same at various times, but the character of the clothing may necessitate a greater effort at adaptation. There must be a sudden change of temperature or clothing in order to produce the lesion, *i.e.*, the ability of the tissues to react must be overtaxed.

The first effect of failure of adaptation is the contraction of muscles and accompanying sensitiveness. The distortion of the bony structure is consequent on the contraction. Ordinarily, if the shock is not too great, the adaptive forces of the organism will exert sufficient power to correct the condition, but when the environment is not suitable the lesion may become permanent.

A lesion can be classed as primary or secondary only after careful study of all those factors which constitute the history and symptomatology of the case. Visceral lesions cause muscular contractions in the spinal area from which they receive their cerebro-spinal nerve communications. They also cause pain in areas of higher sensibility, cutaneous areas, with which they are associated by innervation from the same segment of the spinal cord. These referred pains and contractions of spinal muscles are beginning to be recognised by specialists in pulmonary, digestive and renal diseases.

In cases of heart lesions the body is called upon to make extensive compensatory reactions and so our spinal lesion phenomena may be limited to the area of the heart's innervation, or may extend in proportion as the heart's condition involves the pulmonary circulation, the portal circulation, or the kidney.

It has long been noted by physicians that patients could not be relied upon to interpret their own symptoms. This has led to efforts to discover symptoms which were independent of the patient's imperfect perceptions. Palpation, when indicated, would naturally be used at the areas complained of by the patient. Since the brain takes cognizance of only the peripheral areas of distribution of sensory nerves instead of the whole course of the nerve fibres, the physician might still be misled in applying palpation because he would be largely governed by the patient's sensory impressions. Palpation made with reference to the distribution and function of the nervous system becomes a more satisfactory means of diagnosis.

If the theory of osteopathy is correct we would expect to see function vary from the

normal in proportion to the amount of structural perversion, and this is precisely what happens. Lesions that are slight and of a temporary character show only temporary perversion of function; while those that are more extensive, involving the many functions of the nervous systems—trophic, motor, sensory, secretory—produce tissue changes in the organic parts that cause grave disturbance in organic functions.

Thus we have two types of effects from lesions, those that are minor and soon normalised by nature, and those that are major and require more than nature's power to normalise in order to restore function.

The circulatory changes in viscera affected by spinal lesions are very pronounced. Animals subjected to experimental lesions show vaso-motor changes within a few minutes after the lesion is produced. Human subjects give evidence of vaso-motor disturbances within a few minutes after production of an artificial lesion, or show evidences of improved circulatory conditions sometimes within a few minutes after correction of a lesion. When experimenting on animals the first vaso-motor effect to be seen is a very short period of vaso-constriction. This is followed almost at once by vaso-dilatation, which remains for a variable and sometimes a very long period.

During this period of dilatation of the arterioles the phenomena associated with slight active congestion of the organs appear; the functions are increased, the tissues are of deeper colour and are brighter red than normal, pulsation can sometimes be recognised, and there is increased temperature in the part. Microscopic sections of the viscera made at this time show some edema, dilatation of the blood vessels, and usually some cloudy swelling of the cells. Occasionally slight hæmorrhagic areas are present.

Following this period the veins and capillaries also become dilated. The viscus so affected presents an appearance more nearly resembling passive congestion. The viscus affected has rather less than its usual function at this time. It appears dull and purplish in colour and is usually swollen. Glands affected produce rather less than their usual secretions, which have a tendency to vary in constituents. Muscular activity is diminished. Microscopic examination of such tissues shows greatly dilated vessels, some edema, swelling and granular degeneration of gland cells, and a variable amount of hæmorrhage per diapedesin.

The immediate effects of lesions artificially produced in anæsthetised animals can be watched upon the exposed intestines. The variations in the heart beat can be watched in the human as well as in animal subjects, as the heart action is modified by lesions which act upon the cardiac centres. Variations in the time required for complete emptying of the stomach in persons before and after correction of lesions indicates the importance of the spinal lesion as an etiological factor in gastric diseases.

The same influences which modify the circulation through the viscera are effective also in modifying the circulation through the skeletal muscles, though these effects are less conspicuous and produce less marked symptoms. Bony lesions of the cervicodorsal areas affect the circulation through the muscles of the shoulders and arms; lesions of the lumbar area, innominates and sacrum, affect the circulation through the muscles of the hips, thighs, legs and feet. As a result of this circulatory disturbance, pain and soreness of the muscles often occur and symptoms of muscular rheumatism and of neuritis appear. It is unusual to find muscles innervated from spinal segments long subject to lesion in which the normal muscular tone is present. This muscular weakness is an important factor in the cause and in delaying recovery from scoliosis, as well as in perpetuating lesions of less marked character.

The skeletal muscles are also indirectly affected through the influence of pain and soreness in the region of the lesion itself. Volitional activity is prevented when movement is painful, and thus the muscles chiefly affected fail to receive their normal volitional exercise. Locally the vertebral lesion limits motion, promotes connective tissue overgrowth, produces circulatory disturbances in the surrounding tissues, is associated with local edema and acidosis, and modifies adversely the nervous impulses to and from the spinal cord.

Disease may be divided into three phases—causes, processes, and end results. It is natural to direct treatment to each of them.

In the treatment of causes the part played by osteopathic lesions as causes of disease must be remembered and comprehended. These mechanical disturbances should be located and removed as a first consideration in every case. The finding and correction of the lesions, particularly in serious illness, is a very difficult and delicate procedure.

The osteopathic lesion is considered by the Osteopath to be the most important single cause of disease, both in point of frequency and in depth of influence, and a universal cause

of disease, but it probably never acts alone. The causes of disease are probably always multiple. Hereditary influences frequently determine the amount of load that can be put upon an organ before it shows signs of strain. The treatment of heredity includes precautionary instruction to enable the patient to avoid an effort that he is not likely to be able to endure, and re-education of the relatively weak functions by graduated functional exercise.

Every function and every quality of the living organism is a portal of entry for disease, simply because it may be abused. The treatment for such abuse is first to recognise it, which requires special knowledge and experience; second, to remove the abuse; third, to protect the organ or function; fourth, to strengthen it by corrective treatment to its nerve centre; or, fifth, in emergencies to use substitutes or artificial stimulants.

Conditions of present day living impose unprecedented and widespread abuses. Often the mind is required to assume duties which are too difficult, or one is placed in situations which are emotionally disturbing and the mental strain becomes a cause of disease which calls for mental and psychological methods of treatment.

Injudicious dietary habits, the taking of incompatible foods, insufficient vitamin intake, or toxic foods eventually result in disease. Adjusting the patient's diet is particularly difficult under the present conditions and requires a special study of the patient's needs.

One of the great problems which all physicians face to-day is the treatment of fatigue, an altogether too frequent cause of disease in normal times, but even more so now, and in which the patient as a rule dislikes or is unable to co-operate by taking sufficient rest. Any monotonous work that over-uses particular muscles might come under the classification of fatigue and is often followed by disease. Certain wrong habits of posture while standing or sitting, working all day at an ill-fitting machine, induce imbalances and abuses which may lead to disease. In fact, abuses as causes of disease are too many and varied to list in a paper of this type. The effect of every such cause, however, is made worse by the presence of osteopathic lesions.

In the treatment of disease processes it must not be forgotten that the processes represent nature's logic, often successful without aid, needing no treatment other than protection and rest. Since the body acts similarly in all diseases, the treatment of processes should require a correspondingly uniform method. From the osteopathic point of view the most simple in point of directness and general efficiency is the osteopathic manipulation of affected spinal and other nerve centres. The Osteopath in his examination of the whole body discovers evidence of reflexes which are especially disturbed in the disease with which he is dealing. The disease itself indicates to some extent the line of treatment that should be adopted. By his manipulative treatment of the spine and the specific centres involved, the Osteopath definitely aids all of the processes of defence which the body uses. Osteopathic therapy working as it does directly on the nervous mechanism, and through it affecting the endocrine system, influences the most vital mechanisms of protest and repair.

An understanding of the effort that nature is making, and reasons for it, rationalises our approach and guards us from initiating harmful procedures. The application of heat, absolute rest of the part involved, when practical, and the judicious use of antiseptics, are in line with these purposes. The use of serums supposes that at least part of the process of protest has been done in the laboratory. However, some individuals are very susceptible to serums and there is no question but that treatment of processes by stimulating of the body's own antigens is safer than introducing a material which may prove to be toxic for the individual.

The treatment of end results supposes that nature's effort at recovery has gone as far as it can, or that repair is impossible and the time has come for emergency measures, substitutes, or that to save the body the diseased part must be removed, requiring surgery. If osteopathic therapy is properly applied the end results are less troublesome

Awards and Honours

O.B.E.—C. F. White (Lecturer on Public Health at St. Bartholomew's).

O.M.—E. W. Adrian.

C.V.O.—C. S. Lane Roberts.

At HILL END

On Sunday, April 5th, the Student Nurses' Association made it possible for us all to hear a piano recital in the hall given by Miss Kathleen Blocksidge. The programme included Beethoven's *Pathetique* Sonata which, despite the piano, received a very sympathetic interpretation in her hands. Three Bach chorale Preludes, and a Brahms Intermezzo were also played with insight and clarity, and we were all grateful for the opportunity of hearing great works played really well.

An open invitation was given to students and nurses by the Christian Union, to hear the Reverend H. W. Guiness. In his introduction, Professor Ross told us of the early days of the speaker as a student at Bart.'s. The Reverend Mr. Guiness spoke with enthusiasm and understanding, and answered many questions.

The Memorandum Committee are now revising a draft copy of the report, and most of the contributors are hotly denying that they "said any such thing." However, the end is in sight.

The normal activities of the summer are being vigorously pursued when the weather smiles. The tennis has undergone an extensive mid-seasonal reorganisation, as a result of which ladders, matches and tournaments of unprecedented complexity are being arranged and played. A very successful Club Evening was held on July 8th, in which four courts were continuously occupied with mixed doubles from tea-time till nightfall. Cricket continues regularly despite the luxuriant growth of the outfield—indeed, one might say, of all the field except a small square in the centre where, if the onlookers gaze hard enough, the pitch can be discerned. Though this hazard certainly prevents the batsman from scoring a boundary four, he is often enabled to run five while the opposing fieldsmen are searching for the ball in the heart of the undergrowth, a bare ten yards from his stumps. Even this practice has its dangers for, on one occasion the ball was suddenly discovered when both batsmen were at the same end, and thus a wicket fell.

At CAMBRIDGE

At the time of writing there is the usual flap on as First and Second M.B. approach, the usual chaos of last minute revisions, and the erstwhile cry of it being the last week that counts, fast becoming narrowed down to the last five minutes. The position might well be described as "fluid."

On Monday, June 29th, a general meeting of the Students' Union was held to discuss and vote upon the question of joining the B.M.S.A. Mr. D. V. Bates, the Junior Secretary, came up from Hill End to address the meeting, and in a very polished speech cleared up a lot of points about which there was some confusion. His motion that the Students' Union should not join the B.M.S.A. was carried by 18 votes to 9, three members abstaining. The attendance, as can be seen from the number of votes, was remarkably poor, and can only be attributed to the fact that it was the day before the Anatomy Terminals.

The only sports news that has reached me, despite my earnest appeals to the secretaries, is from the Boat Club and the Athletics Club. The former, though under a very great disadvantage as regards experienced oarsmen, put up a very creditable performance in the May Races. Under the expert tutelage of Dr. Town, they rowed over for the first two days, holding their own with the L.S.E. Boat behind them. On the third day, however, St. Catherines' Second Boat, who had bumped L.S.E. on the second day, got away to a very fast start, and in spite of the frantic vocal efforts of the supporting crowd (all two of them) the Bart.'s eight was bumped. Nevertheless, it was a good effort, and the crew deserve the highest praise.

In the world of athletics we were equally successful, coming in a close second to London Hospital in a match held between the four London Colleges now in Cambridge. The two shining lights were Fyffe and Davy, who took first and second places respectively in the 100 yards, and who contributed largely to our success in the relay.

As regards cricket, nothing can be reported, as someone apparently lost the scorebook, thereby destroying all evidence. Some, of

EXAMINING BORED

Some readers may remember an excellent article by Dr. James Maxwell upon the subject of examinations. If one is in a position to take a really detached view of these matters, it can afford considerable amusement and entertainment, but more often they give rise to a sense of frank annoyance and frustration. One particular type of examination has, I think, caused more than its reasonable share of friction—it is that type which is confined solely to *viva voce* questions.

Short oral examinations are not a fair test of learning—they depend too much upon what we may call for the want of a better word, the "savoir faire" of the individual and the idiosyncrasy of the examiner. One particular examination will spring to most minds. The entrant is provided with a syllabus containing a list of names about which he is expected to know a reasonable amount. This so called reasonable amount is delightfully vague, and depends to a great extent upon the interpretation of the questioner. But more about this later—let us now consider the question of "savoir faire" in more detail. Certain people are literally ill with fright at the thought of a period of one-sided questioning with an examiner—say what you will but these people are handicapped because they can never give of their best. The whole environment makes no attempt to set one at one's ease. A small card with your name on it (the courtesy title of Mr. does not appear before Finals!) arrives saying that the candidate must present himself at a certain time. The unfortunate wretch, already keyed up to fever pitch duly arrives at the appointed time and place only to find that they are running half an hour behind schedule. He then climbs up scores of stairs to find a group of harassed men and women, amongst whom are sure to be a considerable proportion of those irritating individuals who are always willing to expose the ignorance of their less fortunate brethren. Wild rumours that one old horror of an examiner is known to be in his most facetious mood are flying around. In spite of numerous warning notices, people are taking long nervous pulls at cigarettes in a vain attempt to get some consolation from lady nicotine. At the opposite extreme is the person who has already failed four times, and is now obviously in a blessed state of euphoria following the well-meant pre-medication by his friends, who prescribed that drug of doubtful therapeutic value —C_2H_5OH. At long last, the time comes to move into the ante-room. Here, the atmosphere is unreal—everybody is patently ill at ease, and a horrid little bell keeps ringing, after which somebody calls out three numbers in a cold impassive voice. At this stage it is no exaggeration that some people are literally green, while others assume an air of self-confidence, a shade too jaunty to be real. One last nervous gesture to see that the tie is straight, and a muttered prayer that the examiner's liver is behaving itself, and you walk boldly out to your fate. I often wonder whether it is only a popular misconception that one's fate depends to a large extent upon the digestion of the great man. For although I hate to admit it, examiners must be human and it must be particularly trying for them if the discussion centres upon carminatives after a particularly flatogenic meal. Again, how much depends upon the personal characteristics of the candidate? Surely a quiet tidy suiting will produce greater respect than a blatant check suit which clashes with a vivid tie.

Then for the question and answers. Here the poor candidate is between the devil and the deep blue sea. More often than not, the questioner skilfully takes his victim outside the syllabus into deep waters. To take a firm line is to court disaster. To be sarcastic is inevitably fatal, but some questions are unbelievably foolish—the fact that certain lesser known breeds of rabbits are extremely tolerant to atropine may be of use to a Veterinary Surgeon, but has little practical application in the treatment of asthma.

Too often the examiners are divorced from the practicalities of this mundane world, and live in their academic clouds. Some examiners are pedantic to the point of pettiness, and to mention "an aspirin" in place of "an aspirin tablet" may seriously jeopardize one's chances. Others have an unfortunate habit of asking for chemical formula, and are considerably nettled when the answer comes back parrot-wise. It is strangely reminiscent of the scene on the

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(*Continued from preceding page*).
course, may be glad, but to all those who were on brilliant form throughout the term and who were waiting in rosy anticipation of public recognition of their prodigious feats, I apologise profusely, but refuse to accept any blame. The same applies to the big men of the tennis world; blame your secretary, it's his fault—I'm only the stooge that types out what he writes!

ward round when the clerk was asked why he gave such damn fool answers—the apposite reply came back, "Because you ask such damn fool questions!

This article is quite long enough, and if it serves its purpose of letting the authorities realise the not inconsiderable resentment this examination causes it will not have been a failure.

(Incidentally, I have no personal axe to grind as a certain native gift of the gab got me through the examination with considerably less knowledge than some of my less successful colleagues).

ANTHONY.

A REVIEW

SINUS TROUBLE AND PERSONALITY
By H. G. BEDFORD RUSSELL
(Lecture to the Royal Medico-Psychological Association)

A discussion of sinus trouble as an aetiological factor in disease raises in many people either a smile or a yawn. But the bored and the derisive, faced with a case, have often glibly quoted sinusitis as a factor in the production of diseases as widely divergent as asthma and rheumatism; they are then grateful to regard the sinuses, as some regard the stars, as the fons et origo mali. Yet it is probable that few can recognise the sphenordial sinus in a skiagram of the skull; and how many realise that the sinus mucous membranes and the meninges have a common nerve supply?

In this lecture Mr. Bedford Russell lists several important and significant facts, experimental and clinical, which suggest how sinus disease may be related to fibrositis, migraine, the neuralgias and so on. He emphasises the fact that pus in the sinuses is not the sole criterion of sinusitis; there are numerous less obvious signs (of which œdema is the most important) which are observable clinically or radiologically and are equally conclusive.

In the absence of signs, many symptoms of pain and special sense disturbance are often diagnosed as psychogenic in origin. This lecture points out that some of these cases, carefully followed up and properly investigated, are revealed as sinus disease. It may be questionable whether the patient derives any benefit from this, but Mr. Russell quotes a convincing, though small, series of cases of mental disease in which investigation of the sinuses and appropriate treatment have restored the patient, temporarily or permanently, to mental normality. In view of these facts it seems that there is a definite, though limited, relationship between sinus disease and mental disease; the rhinologist has, therefore, a place in the treatment of the latter.

SPORTS NEWS

The Hospital repeated last year's success when they visited Hornsey C.C. on Sunday, May 17th. Batting first, the home side were dismissed for 65, the only resistance coming from T. Plant, who, going in number 3, lasted till the end for a somewhat fortuitous 35. Full honours go to John Evans, who in eight excellent overs took 7 for 24. The Hospital passed the enemy total after an hour's batting with 6 wickets in hand, and went on to make 151, Evans once more heading the list with a freely scored 43. G. H. Wells Cole, going in first, bore the brunt of the attack and made a very correct 23. Later comers found life a little easier, J. N. H. Jones and M. R. Hunt having little difficulty in reaching the 20's.

The cricket finished, the ensuing darts match resulted in the inevitable win by the Hospital.

HORNSEY: 65. J. Evans 7 for 24, R. Heyland 2 for 2.

ST. BART.'S.: G. H. Wells Cole, lbw, b Boxer, 23; W. D. Linsell, b Boxer, 2; J. W. G. Evans, b Brown, 43; R. Heyland, lbw, b Boxer, 4; C. S. M. Stephen, ct wkt, b Brown, 9; J. N. H. Jones, run out, 27; J. H. Gibson, ct Somerville, b Boxer, 1; M. R. Hunt, not out, 22; R. B. McGrigor, c Boxer, b Palmer, 8; A. J. Gray, b Palmer, 2; J. L. Morris, b Clark, 3. Extras, 8. Total, 151. N. Boxer 4 for 49, A. Palmer 2 for 24.

The match against the London Fire Service, played at Chislehurst, had to be abandoned after tea owing to rain. In the early afternoon the Fire Service had been batting confidently and had scored 140 for 3. Summers and Levy scored next to nothing in the first hour, and runs didn't come until Summers was replaced by Bills. Levy plodded on for a wearisome 66 not out, whilst Bills gave a display of batsmanship that would have graced any ground, and was eventually caught at cover, having made 67. Credit is due to Evans, Roberts and Heyland, who bowled tirelessly throughout the afternoon.

ST. BART.'S HOSPITAL v. ST. GEORGE'S SCHOOL, WEYBRIDGE

On Sunday, June 28th, a team of about extra A strength struggled down to Weybridge. The train, which was solid with people, persuaded most of us that our journey was by no means really necessary. Our spirits were revived on finding the surroundings ideal, and the opposition quite young schoolboys with a leavening of masters. Despite the fact that eight people bowled and that some of them appeared new to the game the school were put out for 144, Evans, Heyland, Gray and Gibson taking two wickets each. The versatile Stephen, making a maiden appearance as wicket keeper, gave a startling performance as wicket keeper, stopping the ball with every part of his anatomy, noticeably his chest.

Our innings really began and ended with Moffat, who, coming in at number three, attacked strongly from the first ball, and when the score reached 30 was responsible for the whole of it. He adopted a crouching stance—rather a flat swing, and was obviously trying to get a lot of "stop" on the ball. However, he hooked and drove stupendously and was at last dismissed for a magnificent 72, which included ten fours, two sixes, and one broken bat. The remaining batsmen appeared mediocre beside this display, but managed to scratch together the remaining runs with two wickets in hand.

St. George's School: 144 (Wilson 52).

St. Bart.'s Hospital: 151 for 8 wickets (Moffat 72).

UNIVERSITY OF CAMBRIDGE

FINAL M.B. EXAMINATION, EASTER TERM, 1942

Part I. (*Surgery, Midwifery and Gynæcology*)

Alcock, R. J.
Bailey, A. G. S.
Baron, H. W. A.
Birkett, N. L.
Collyns, J. A. H.
Danby, A. J.
Durham, M. P.
Fluker, J. L.
Harrold, A. G.
Kingdom, L. G.
Lomas, J.
Loosemore, T. G. E.
Roxburgh, I. A.
Sandes, D. L.
Smith, I. M.
Sookias, O.
Squire, J. W.
Stephens, J. P.
Johnston, E. N. M.

Part II. (*Principles and Practice of Physic, Pathology and Pharmacology*)

Arulanandom, V. R.
Birkett, N. L.
Borrie, P. F.
Edwards, C. O.
Ffrench, G. E.
Fluker, J. L.
Holborow, E. J.
Kelsey, D. E. R.
Knott, J. M. S.
Leacock, A. G.
Lim, K. H.
Sandes, D. L.
Westwood, J. C. N.

UNIVERSITY OF LONDON

THIRD (*M.B., B.S.*) EXAMINATION FOR MEDICAL DEGREES, APRIL, 1942

Honours:

Champ, C. J., Distinguished in Medicine.
Hill, I. M., Distinguished in Pathology, and in Applied Pharmacology and Therapeutics.
Weitzman, D., Distinguished in Pathology.

Pass:

Aston, J. N.
Atkinson, W. J.
Borrelli, V. M.
Citron, R.
Davies, J. A. Ll.
Evans, D. T. R.
Evans, R. J.
Haile, J. P.
Messer, B.
Ogilvie, K. R.
Robertson, D. J.
Routledge, R. T.
Sinha, K. N.
Stone, P. H. D.
Tickner, A.
Trevan, D. J.
Tweedy, P. S.
Ware, C. E. M.
Watson, P. C.
Webb, E. J. E.

SUPPLEMENTARY PASS LIST

Part I.

Allardice, A. R.
Bartlett, D.
Perkins, E. S.
Picton, F. C. R.
Birch, J.
Gifford, C. S. E.
Hanbury, W. J.
Hinds, S. J.
Ismay, D. G.
Karn, H.
Kok, D'A.
Lambley, D. G.
Macaulay, J. C.
McShine, A. D.
Merryfield, S. J. T.
Pitt, N. M. F. P.
Robertson, J. A.
Sadler, J. A.
Stack, H. G.
Story, P.
Thomson, I. F.
Vahrman, J.
Vickery, K. O. A.
Wells, B. G.
Whelan, W. H.

Part II.

Beeston, J.
Dalton, I. S.
D'Silva, J. L.
Robertson, J. A.
Sadler, J. A.
Shaw, C. H.
Townsley, B.

Part III.

Bevan, J. E. C.
Birch, J.
Karn, H.
Shah, J.
Vahrman, J.

BIRTHS

BENISON.—On 19th May, 1942, to Eileen, wife of Major R. L. Benison, R.A.M.C., a son (Michael Peter).

BERRY.—On June 18th, 1942, at Zomba, Nyasaland, to Veronica Anne (née Holme), wife of Dr. Wm. T. C. Berry, Colonial Medical Service—a son.

JACK.—On June 28th, 1942, at Poynings, Ashburnham Gardens, Eastbourne, to Margaret (née Field), wife of F./Lt. A. H. Jack—a daughter.

DEATHS

VLIELAND.—On June 13th, 1942, at 2, Fitzwilliam House, Richmond, very peacefully, Charles James Vlieland, M.D., late of Exeter, beloved husband of Alice Edith Vlieland, C.B.E. Aged 84.

POWER.—On June 27th, 1942, at a nursing home at Ashby-de-la-Zouch, Edward Thomas Power, M.R.C.S., of Atherstone. Aged 87.

MARRIAGES

MACVINE—VIEUSSEUX.—On June 13th, at St. Andrew's Church, Enfield, Middx., John Sinclair MacVine, F.R.C.S. Ed., Central Middx. Hospital, Acton Lane, London, N.W.10, son of the late Dr. and Mrs. MacVine, of Camden Lodge, London, N.7, to Daphne Enid Vieusseux, W.A.A.F., youngest daughter of Mr. and Mrs. E. T. Vieusseux, Woodbury, Clay Hill, Enfield.

ROWNTREE—MARSHALL.—On June 20th, 1942, at Kingston, Paul, younger son of Colin and Mary Rowntree, of York, to Gwendoline, only daughter of Alfred and Kate Marshall, of Mitcham.